

CJA 20 APPOINTMENT OF AND AUTHORITY TO PAY COURT APPOINTED COUNSEL (Rev. 12/03)

1. CIR./DIST./ DIV. CODE 0312		2. PERSON REPRESENTED TROY PATTERSON		VOUCHER NUMBER																																																																																																																									
3. MAG. DKT./DEF. NUMBER		4. DIST. DKT./DEF. NUMBER CR03-839(MLC)		5. APPEALS DKT./DEF. NUMBER																																																																																																																									
7. IN CASE/MATTER OF (Case Name) USA V. TROY PATTERSON		8. PAYMENT CATEGORY <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Petty Offense <input type="checkbox"/> Misdemeanor <input type="checkbox"/> Other <input type="checkbox"/> Appeal		9. TYPE PERSON REPRESENTED <input checked="" type="checkbox"/> Adult Defendant <input type="checkbox"/> Appellant <input type="checkbox"/> Juvenile Defendant <input type="checkbox"/> Appellee <input type="checkbox"/> Other																																																																																																																									
10. REPRESENTATION TYPE (See Instructions) CK																																																																																																																													
11. OFFENSE(S) CHARGED (Cite U.S. Code, Title & Section) <i>If more than one offense, list (up to five) major offenses charged, according to severity of offense.</i> 21:841(a)(1) and 841(h)(1)(A) & 18:2 POSSESS W/INTENT TO DISTRIBUTE COCAINE (CRACK)																																																																																																																													
12. ATTORNEY'S NAME (First Name, M.I., Last Name, including any suffix), AND MAILING ADDRESS MICHAEL ARMSTRONG, ESQ. 79 MAINBRIDGE AVENUE WILLINGBORO, NJ 08046 Telephone 609-877-5511			13. COURT ORDER <input checked="" type="checkbox"/> O Appointing Counsel <input type="checkbox"/> C Co-Counsel <input type="checkbox"/> F Subs For Federal Defender <input type="checkbox"/> R Subs For Retained Attorney <input type="checkbox"/> P Subs For Panel Attorney <input type="checkbox"/> Y Standby Counsel Prior Attorney's Appointment <input checked="" type="checkbox"/> Because the above-named person represented has testified under oath or has satisfied this Court that he or she (1) is financially unable to employ counsel and (2) does not wish to waive counsel, and because the interests of justice so require, the attorney whose name appears in Item 12 is appointed to represent this person in this case; OR <i>Mary L. Cooper</i> Signature of Presiding Judge or By Order of the Court 7-1-08 Date of Order Nunc Pro Tunc Date Repayment or partial repayment ordered from the person represented for this service at time appointment <input type="checkbox"/> YES <input type="checkbox"/> NO																																																																																																																										
14. NAME AND MAILING ADDRESS OF LAW FIRM (Only provide per																																																																																																																													
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>CATEGORIES (Attach itemization of services with dates)</th> <th>HOURS CLAIMED</th> <th>TOTAL AMOUNT CLAIMED</th> <th>MATH/TECH. ADJUSTED HOURS</th> <th>MATH/TECH. ADJUSTED AMOUNT</th> <th>ADDITIONAL REVIEW</th> </tr> </thead> <tbody> <tr> <td>15. In Court</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>a. Arraignment and/or Plea</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>b. Bail and Detention Hearings</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>c. Motion Hearings</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>d. Trial</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>e. Sentencing Hearings</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>f. Revocation Hearings</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>g. Appeals Court</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>h. Other (Specify on additional sheets)</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>(RATE PER HOUR =) TOTALS:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>16. Out of Court</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>a. Interviews and Conferences</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>b. Obtaining and reviewing records</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>c. Legal research and brief writing</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>d. Travel time</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>e. Investigative and other work (Specify on additional sheets)</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>(RATE PER HOUR =) TOTALS:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>17. Travel Expenses (lodging, parking, meals, mileage, etc.)</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>18. Other Expenses (other than expert, transcripts, etc.)</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>						CATEGORIES (Attach itemization of services with dates)	HOURS CLAIMED	TOTAL AMOUNT CLAIMED	MATH/TECH. ADJUSTED HOURS	MATH/TECH. ADJUSTED AMOUNT	ADDITIONAL REVIEW	15. In Court						a. Arraignment and/or Plea						b. Bail and Detention Hearings						c. Motion Hearings						d. Trial						e. Sentencing Hearings						f. Revocation Hearings						g. Appeals Court						h. Other (Specify on additional sheets)						(RATE PER HOUR =) TOTALS:						16. Out of Court						a. Interviews and Conferences						b. Obtaining and reviewing records						c. Legal research and brief writing						d. Travel time						e. Investigative and other work (Specify on additional sheets)						(RATE PER HOUR =) TOTALS:						17. Travel Expenses (lodging, parking, meals, mileage, etc.)						18. Other Expenses (other than expert, transcripts, etc.)					
CATEGORIES (Attach itemization of services with dates)	HOURS CLAIMED	TOTAL AMOUNT CLAIMED	MATH/TECH. ADJUSTED HOURS	MATH/TECH. ADJUSTED AMOUNT	ADDITIONAL REVIEW																																																																																																																								
15. In Court																																																																																																																													
a. Arraignment and/or Plea																																																																																																																													
b. Bail and Detention Hearings																																																																																																																													
c. Motion Hearings																																																																																																																													
d. Trial																																																																																																																													
e. Sentencing Hearings																																																																																																																													
f. Revocation Hearings																																																																																																																													
g. Appeals Court																																																																																																																													
h. Other (Specify on additional sheets)																																																																																																																													
(RATE PER HOUR =) TOTALS:																																																																																																																													
16. Out of Court																																																																																																																													
a. Interviews and Conferences																																																																																																																													
b. Obtaining and reviewing records																																																																																																																													
c. Legal research and brief writing																																																																																																																													
d. Travel time																																																																																																																													
e. Investigative and other work (Specify on additional sheets)																																																																																																																													
(RATE PER HOUR =) TOTALS:																																																																																																																													
17. Travel Expenses (lodging, parking, meals, mileage, etc.)																																																																																																																													
18. Other Expenses (other than expert, transcripts, etc.)																																																																																																																													
19. CERTIFICATION OF ATTORNEY/PAYEE FOR THE PERIOD OF SERVICE TO: _____			20. APPOINTMENT TERMINATION DATE IF OTHER THAN CASE COMPLETION		21. CASE DISPOSITION																																																																																																																								
22. CLAIM STATUS <input type="checkbox"/> Final Payment <input type="checkbox"/> Interim Payment <input type="checkbox"/> Supplemental Payment Have you previously applied to the court for compensation and/or Other than from the Court, have you, or to your knowledge has anyone else, received payment (compensation or anything of value) from any other source in representation <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, were you <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, give details on additional sheets. I swear or affirm the truth or correctness of the above statements. Signature of _____ Date _____																																																																																																																													
23. IN COURT COMP.		24. OUT OF COURT		25. TRAVEL EXPENSES																																																																																																																									
26. OTHER EXPENSES		27. TOTAL AMT. APPR./CERT.																																																																																																																											
28. SIGNATURE OF THE PRESIDING JUDGE				DATE																																																																																																																									
28a. JUDGE CODE																																																																																																																													
29. IN COURT COMP.		30. OUT OF COURT COMP.		31. TRAVEL EXPENSES																																																																																																																									
32. OTHER EXPENSES		33. TOTAL AMT. APPROVED																																																																																																																											
34. SIGNATURE OF CHIEF JUDGE, COURT OF APPEALS (OR DELEGATE) Payment approved in excess of the statutory threshold amount.				DATE																																																																																																																									
34a. JUDGE CODE																																																																																																																													